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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Identify Yourself			
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
Your full name			
Write the name that is on	Charles		Marcella
picture identification (for example, your driver's	First name	_	First name
	E		A
ilcense or passport).	Middle name	_	Middle name
Bring your picture	Greene		Greene
meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years			
Include your married or maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6558		xxx-xx-5917
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Charles First name E Middle name Greene Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Greene Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number XXX-XX-6558

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Debtor 1 Charles E Greene
Debtor 2 Marcella A Greene

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	40020 Onlyward Avenue	If Debtor 2 lives at a different address:		
		19626 Oakwood Avenue Lynwood, IL 60411 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this	Check one: Over the last 180 days before filing this petition, I		
	.,	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Deb	otor 2 Marcella A Greene	9				Case n	umber (if known)			
Par	t 2: Tell the Court About	Your Bankru	ptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	☐ Chapter 7								
		☐ Chapter	11							
		☐ Chapter	12							
		■ Chapter	13							
8.	How you will pay the fee	about order	how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself, y	ou may pay with cast	h, cashier's check, or money		
				the fee in installments. If ye in Installments (Official Form		e this option, sign	and attach the Applic	eation for Individuals to Pay		
		☐ I requ	est tha	t my fee be waived (You ma	y request	this option only if	you are filing for Cha	pter 7. By law, a judge may,		
		that a	pplies to	uired to, waive your fee, and ropy or family size and you are cation to Have the Chapter 7 in	unable to	o pay the fee in in	stallments). If you cho	oose this option, you must fill		
9.	Have you filed for	□ No.								
	bankruptcy within the last 8 years?	Yes.								
		ı	District	ND IL Ch 7 - husband only (discharged)	When	3/18/10	Case number	10-11858		
			District	omy (alconal god)	- When		Case number			
		I	District		When		Case number			
10.	Are any bankruptcy	■ No								
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
		I	Debtor				Relationship to y	/ou		
			District		_ When		Case number, if			
			Debtor		140		Relationship to y			
		I	District		_ When		Case number, if	known		
11.	Do you rent your	■ No.	Go to li	ne 12.						
	residence?	☐ Yes.	Has yo	ur landlord obtained an eviction	on judgm	ent against you ar	nd do you want to stay	in your residence?		
				No. Go to line 12.						
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	t About ai	า Eviction Judgme	ent Against You (Form	101A) and file it with this		

Charles E Greene

Debtor 1

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Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time business? No. Go to Part 4. Yes. Name and location of business A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this notition.	
12. Are you a sole proprietor of any full- or part-time business? ■ Yes. Name and location of business A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach ■ No. Go to Part 4. Name and location of business Name of business, if any Number, Street, City, State & ZIP Code	
of any full- or part-time business? No. Go to Part 4. Yes. Name and location of business A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach One of part 4. Name and location of business Name of business, if any Number, Street, City, State & ZIP Code	
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach	
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach	
sole proprietorship, use a separate sheet and attach	
it to this notition Chock the appropriate how to describe your business.	
it to this petition. Check the appropriate box to describe your business:	
Health Care Business (as defined in 11 U.S.C. § 101(27A))	
Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
Stockbroker (as defined in 11 U.S.C. § 101(53A))	
Commodity Broker (as defined in 11 U.S.C. § 101(6))	
None of the above	
13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set applications. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set applications. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance sheet, stated operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the product of the pro	tement of
■ No. I am not filing under Chapter 11. For a definition of <i>small</i>	
business debtor, see 11 U.S.C. § 101(51D). I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Baccode.	nkruptcy
☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankrup	tcy Code.
Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention	
14. Do you own or have any No.	
property that poses or is alleged to pose a threat ☐ Yes.	
of imminent and What is the hazard?	
identifiable hazard to public health or safety?	
Or do you own any property that needs If immediate attention is needed, why is it needed?	
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?	
Number, Street, City, State & Zip Code	

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Debtor 1 Charles E Greene Debtor 2 Marcella A Greene

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a Incapacity. mental deficiency that makes me incapable of realizing or

> making rational decisions about finances.

My physical disability causes Disability. П

> me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

I am currently on active Active duty. military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

I have a mental illness or a mental Incapacity.

> deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to Disability.

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	otor 1 otor 2	Charles E Greene Marcella A Greene)	Document	Case	number (if kno	own)		
Par	t 6:	Answer These Questi	ons for Re	eporting Purposes					
16.		t kind of debts do nave?	16a.	Are your debts primarily consumindividual primarily for a personal,			11 U.S.C. § 101(8) as "incurred by an		
				☐ No. Go to line 16b.					
				■ Yes. Go to line 17.					
			16b.	Are your debts primarily busine money for a business or investme					
				☐ No. Go to line 16c.					
				☐ Yes. Go to line 17.					
			16c.	State the type of debts you owe the	hat are not consumer debts or	business deb	ots		
17.		ou filing under oter 7?	■ No.	I am not filing under Chapter 7. G	o to line 18.				
Do you estimate that after any exempt			☐ Yes.	I am filing under Chapter 7. Do yo expenses are paid that funds will					
	admi	administrative expenses		□ No	□ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.		How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		2 5,001-50,000		
			□ 50-99		☐ 5001-10,000		□ 50,001-100,000		
			☐ 100-19 ☐ 200-9		☐ 10,001-25,000		☐ More than100,000		
19.		How much do you estimate your assets to	□ \$0 - \$50,000		□ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion		
		orth?		01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
				001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million		☐ More than \$50 billion		
20.		much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion		
	to be	nate your liabilities ?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$30 billion		
Par	t 7:	Sign Below							
For	you		I have ex	amined this petition, and I declare	under penalty of perjury that the	ne information	n provided is true and correct.		
				chosen to file under Chapter 7, I are tates Code. I understand the relief			er Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.		
				rney represents me and I did not potential. I have obtained and read the not			attorney to help me fill out this		
			I request	relief in accordance with the chapt	ter of title 11, United States Co	de, specified	in this petition.		
				and making a false statement, con cy case can result in fines up to \$2 d 3571.					
				les E Greene		la A Greene	9		
				E Greene e of Debtor 1	Marcella A Signature of				
			Executed	December 4, 2015	Executed or	Decemb			
				MM / DD / YYYY		MM / DD /	/ YYYY		

Dobtor 1	Charles E Greene	.1100	Document	Page 7 of 55	,10 10:10:01	2000
Debtor 1 Debtor 2	Marcella A Greene				Case number (if known)	
•	attorney, if you are ted by one	under Chapter 7, 11,	12, or 13 of title 11, Unite	ed States Code, and hav	e explained the relief	or(s) about eligibility to proceed available under each chapter e required by 11 U.S.C. §
	not represented by ey, you do not need s page.	342(b) and, in a case	,	applies, certify that I have	\ /	an inquiry that the information
		/s/ Edwin L Feld		Date	December 4,	2015
		Signature of Attorney	for Debtor		MM / DD / YYYY	,
		Edwin L Feld				
		Printed name				

Edwin L Feld & Associates, LLC

Firm name

1 N LaSalle Street **Suite 1225**

		DOGUIIIEII	1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Charles E Greene			
	First Name	Middle Name	Last Name	
Debtor 2	Marcella A Green	e		
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS	
Case number _				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	202,925.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	27,700.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	230,625.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	361,844.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	800.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	26,037.00
	Your total liabilities	\$	388,681.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,306.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,096.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1	Charles E Greene	Document	rage 9 of 55
Debtor 2	Marcella A Greene		Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,023.00

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	800.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	800.00

	Ca	se 15-41198	Doc 1	Filed 12/04/15 Document	Entered 12/04/19 Page 10 of 55	5 15:18:51	Desc	Main
Fill	in this inform	nation to identify yo	ur case and th					
Deb	otor 1	Charles E Gree	-	Name	Last Name			
	otor 2 use, if filing)	Marcella A Green		Name	Last Name			
Unit	ted States Bar	nkruptcy Court for the	: NORTHER	N DISTRICT OF ILLIN	NOIS			
Cas	e number				-			Check if this is an amended filing
n eac fits	chedule ch category, se best. Be as co space is neede	emplete and accurate a ed, attach a separate sl	ibe items. List and spossible. If two heet to this form	o married people are fili	asset fits in more than one ca ing together, both are equally itional pages, write your name n or Have an Interest In	responsible for sup	plying cor	rect information. If
	you own or ha	, , ,	ole interest in an	y residence, building, la	and, or similar property?			
	Yes. Where is	the property?						
1.1				What is the property	? Check all that apply.			
	19626 Oak			Single-family h	nome			or exemptions. Put the
	Street address, if	f available, or other descript	ion	■ Duplex or mult	i-unit building	amount of any secu Creditors Who Hav		on Schedule D: ecured by Property.
				☐ Condominium	or cooperative			
	Lynwood City	IL 6	0411-0000 ZIP Code	☐ Manufactured of Land☐ Investment pro	or mobile home	Current value of the entire property? \$202,925	pe	urrent value of the ortion you own?
	City	State	Zii Gode	Timeshare Other	рету	Describe the natur	re of your	ownership interest
				Who has an interest one. Debtor 1 only	in the property? Check	a life estate), if kno		by the entireties, or
	Cook			Debtor 2 only				
	County			■ Debtor 1 and D ■ At least one of	Debtor 2 only the debtors and another	Check if this is (see instruction		nity property
				Other information yo property identification	onigio iaiiii		od	

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$202,925.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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_	tor 2 Marcella A Greene		Case number (if known)	
_	ars, vans, trucks, tractors, sport utility	vehicles, motorcycles		
- 11	No			
	Yes			
_	163			
3.1	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl	
0.1	Model:	Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year:	Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another		
	2006 GMC Envoy (200,000		44.000.00	44.000.00
	miles)	Check if this is community property (see instructions)	\$4,000.00	\$4,000.00
3.2	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl	
	Model:	■ Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
	2015 Chevy Camaro (w/lien) - To be paid directly	☐ Check if this is community property	\$20,000.00	\$20,000.00
		(see instructions)		
5 A	dd the dellar value of the portion you o	own for all of your entries from Part 2, including	any ontring for	
.p	ages you have attached for Part 2. Writ	JWII IOI AII OI VOUI EIILIIES IIOIII FAIL Z. IIICIUUIIIU /	arry errores for	
		e that number here		\$24,000.00
Part 3	3: Describe Your Personal and Household	te that number here		\$24,000.00
	Describe Your Personal and Household you own or have any legal or equitable	te that number here		Current value of the portion you own? Do not deduct secured
Do y 6. H c		te that number here Items interest in any of the following items?		Current value of the portion you own?
Do y 6. H 6. E	cou own or have any legal or equitable busehold goods and furnishings busehold goods	te that number here Items interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Do y 6. H c E	ou own or have any legal or equitable busehold goods and furnishings fixamples: Major appliances, furniture, lines No Yes. Describe Furnishings	te that number here Items interest in any of the following items? ns, china, kitchenware		Current value of the portion you own? Do not deduct secured claims or exemptions.
Do y 6. H 6	cou own or have any legal or equitable busehold goods and furnishings busehold goods	te that number here Items interest in any of the following items? ns, china, kitchenware		Current value of the portion you own? Do not deduct secured claims or exemptions.
6. He E	ou own or have any legal or equitable busehold goods and furnishings fixamples: Major appliances, furniture, lines No I Yes. Describe Furnishings Furniture (w/lineshings)	tee that number here Items Interest in any of the following items? Ins, china, kitchenware Item) Items Items		Current value of the portion you own? Do not deduct secured claims or exemptions. \$2,000.00
6. He E	ou own or have any legal or equitable busehold goods and furnishings fixamples: Major appliances, furniture, lines No Yes. Describe Furnishings Furniture (w/linestropies: Televisions and radios; audio, v	tee that number here Items Interest in any of the following items? Ins, china, kitchenware Item) Items Items		Current value of the portion you own? Do not deduct secured claims or exemptions. \$2,000.00
6. Ho y	cou own or have any legal or equitable cousehold goods and furnishings fixamples: Major appliances, furniture, lines No Furnishings Furniture (w/lines) ectronics fixamples: Televisions and radios; audio, voincluding cell phones, cameras, No Yes. Describe No Yes. Describe bllectibles of value	tee that number here	iters, scanners; music collec	Current value of the portion you own? Do not deduct secured claims or exemptions. \$2,000.00 \$200.00

Official Form 106A/B

Case 15-41198 Doc 1 Filed 12/04/15 Entered 12/04/15 15:18:51 Desc Main Page 12 of 55 Document Debtor 1 Charles E Greene Marcella A Greene Debtor 2 Case number (if known) 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ Yes. Describe..... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ No ■ Yes. Give specific information..... \$0.00 SS Benefits (See Sch I) 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,200.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ Yes..... Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Checking - Chase** \$1,500.00 17.1. 18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No Institution or issuer name: ☐ Yes.....

Entered 12/04/15 15:18:51 Case 15-41198 Doc 1 Filed 12/04/15 Desc Main Document Page 13 of 55 Debtor 1 Charles E Greene Marcella A Greene Debtor 2 Case number (if known) 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: Pension (See Schedule I) \$0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support

■ No

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information......

Debtor 2 Marcella A Greene Case number (if known) 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Term policies Surrender or refund value: Term policies \$0 22. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Give specific information		Case 15-41198	Doc 1	Filed 12/04/15 Document	Entered 12/04/15 15:18:51 Page 14 of 55	Desc Main
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 1. Interests in insurance policies				Document	•	
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance New Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Surrender or refund	Exam _i ■ No	ples: Unpaid wages, disabili benefits; unpaid loans	lity insurance s s you made to		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
Term policies St. 32. Any interest in property that is due you from someone who has died if you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No No. Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	<i>Exam_l</i> □ No	ples: Health, disability, or lif Name the insurance compa	any of each p			
32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here					вепетістагу:	
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim						
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	If you somed No	are the beneficiary of a livinone has died. Give specific information s against third parties, whiples: Accidents, employment Describe each claim contingent and unliquidate Describe each claim	ng trust, expection of the claims of the cla	ct proceeds from a life in you have filed a lawsu surance claims, or right	isurance policy, or are currently entitled to red it or made a demand for payment s to sue	
37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?				_		\$1,500.00
No. Go to Part 6. Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	Part 5: De	escribe Any Business-Related	Property You	Own or Have an Interest In	. List any real estate in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	No. Go	o to Part 6. Go to line 38. escribe Any Farm- and Comme	ercial Fishing-F	Related Property You Own		
■ No. Go to Part 7.	46. Do you	u own or have any legal o	,		commercial fishing-related property?	
☐ Yes. Go to line 47.	_					
Current value of the portion you own? Do not deduct secure			or Have an Int-	west in That You Did Not 1	iet Abovo	Current value of the portion you own? Do not deduct secured claims or exemptions.

53. Do you have other property of any kind you did not already list?

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Debto Debto				Case number (if known)	
	Examples: Season tickets, country club membership				
	l No				
	Yes. Give specific information				
	Not expected tax refund for	or 2015			\$0.00
54.	Add the dollar value of all of your entries from Part 7. W	rite that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$202,925.00
56.	Part 2: Total vehicles, line 5		\$24,000.00		
57.	Part 3: Total personal and household items, line 15		\$2,200.00		
58.	Part 4: Total financial assets, line 36		\$1,500.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+ _	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$27,700.00	Copy personal property total	\$27,700.00
63.	Total of all property on Schedule A/B. Add line 55 + line 6	32			\$230,625.00

Official Form 106A/B Schedule A/B: Property

		DOGUITIE	III Paue 10 01 55	
Fill in this infor	mation to identify your	case:		
Debtor 1	Charles E Greene	•		
	First Name	Middle Name	Last Name	
Debtor 2	Marcella A Green	е		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check
\·····				I P CHECK

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

if this is an

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption.
19626 Oakwood Ave Lynwood, IL 60411 Cook County single-family: 19626 Oakwood Avenue, Lynwood IL 60411 Line from <i>Schedule A/B</i> : 1.1	\$202,925.00	\$30,000.00 735 ILCS 5/12-901 100% of fair market value, up to any applicable statutory limit
2006 GMC Envoy (200,000 miles) Line from Schedule A/B: 3.1	\$4,000.00	\$2,400.00 735 ILCS 5/12-1001(c) 100% of fair market value, up to any applicable statutory limit
Furnishings Line from Schedule A/B: 6.1	\$2,000.00	\$2,000.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit
SS Benefits (See Sch I) Line from Schedule A/B: 14.1	\$0.00	100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(g)(1)
Checking - Chase Line from Schedule A/B: 17.1	\$1,500.00	\$1,500.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit

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Charles E Greene

Debtor 1 Marcella A Greene Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Schedule A/B Check only one box for each exemption. **Term policies** 215 ILCS 5/238 100% \$0.00 Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

		Document	Page 18	of 55		
Fill in this inform	nation to identify you	r case:				
Debtor 1	Charles E Green	Middle Name	Last Name			
Debtor 2	Marcella A Gree		LastName			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF ILLI	INOIS		-	
Case number						
(if known)					_	if this is an led filing
O#: -: -! F	400D					
Official Form	-		_			
Schedule I	D: Creditors	Who Have Claims S	Secured	by Propert	У	12/15
		two married people are filing together number the entries, and attach it to thi				
1. Do any creditors h	nave claims secured by	your property?				
☐ No. Check	this box and submit th	nis form to the court with your other	schedules. Yo	u have nothing else	to report on this form.	
■ Yes. Fill in	all of the information b	pelow.				
Part 1: List All	Secured Claims					
		ore than one secured claim, list the credit			Column B	Column C
		articular claim, list the other creditors in Peraccording to the creditor's name.	art 2. As much	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 GM Financ	cial	Describe the property that secures th		\$32,409.00	\$20,000.00	\$12,409.00
Creditor's Name		2015 Chevy Camaro (w/lien) paid directly	- To be			
PO Box 78	143	As of the date you file, the claim is: C	heck all that			
Phoenix, A	-	apply. Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the dek	ot? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only			ortgage or secur	ed		
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit	•			
Check if this cla community deb		Other (including a right to offset)	Purchase Money Security			
Date debt was incur	rred	Last 4 digits of account number	er			
2.2 SPS		Describe the property that secures th	e claim:	\$327,906.00	\$202,925.00	\$124,981.00
Creditor's Name		19626 Oakwood Ave Lynwoo	od, IL	***		
		60411 Cook County				
		single-family: 19626 Oakwoo Avenue, Lynwood IL 60411	od			
PO Box 65	350	As of the date you file, the claim is: C	heck all that			
	City, UT 84165	apply. Contingent				
	City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the dek	ot? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as m car loan)	ortgage or secur	ed		
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this cla community deb	im relates to a	Other (including a right to offset)	Mortgage			
Date debt was incur	rred	Last 4 digits of account number	er			

Official Form 106D

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Debtor 1 Charles E Greene		Case number (if know)		
First Name Middle N	ame Last Name			
Debtor 2 Marcella A Greene				
First Name Middle N	ame Last Name			
2.3 Synchrony Bank	Describe the property that secures the claim:	\$1,529.00	\$200.00	\$1,329.00
Creditor's Name	Furniture (w/lien)			
PO Box 960061	As of the date you file, the claim is: Check all that			
Orlando, FL 32896	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
, , , , , , , , , , , , , , , , , , ,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in Co	olumn A on this page. Write that number here:	\$361,844.00		
If this is the last page of your form, add write that number here:	the dollar value totals from all pages.	\$361,844.00		
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
	e notified about your bankruptcy for a debt that yo	uu already listed in Part 1. For exam	nle if a collection a	agency is trying
to collect from you for a debt you owe to s	omeone else, list the creditor in Part 1, and then l d in Part 1, list the additional creditors here. If you	ist the collection agency here. Simi	larly, if you have m	ore than one
Name Address				
-NONE-	On which	line in Part 1 did you enter	the creditor?	
	Last 4 dig	its of account number		

Debtor 1 Charles E Greene First Name Middle Name Last Name Debtor 2 Marcella A Greene First Name Middle Name Last Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filling Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party in ye executory contracts or unexpired leases that could result in a claim. Also list executory contracts or schedule AB-Property (Difficial Form 106B) not include any creditors with NONPRIORITY claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with part and the boxes on the left. Attach the Continuation Page to this page. If you have not end the other part 1. List All of Your PRIORITY Unsecured Claims against you? Yes. 2. List all of your priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured			Document	Pa	ae 20 of	55		_			
Debtor 2 Marcella A Greene First Nome	Fill in this	information to identify your	case:								
Debtor 2 Marcella A Greene First Nome	Debtor 1	Charles F Greene									
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Check if this is an amended filling				Last	Name						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number C											
Case number Check if this is an amended filling Check C	(Spouse if, filin	ng) First Name	Middle Name	Last I	Name						
Check if this is an amended filing Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Se as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party try oxecutory contracts on unexpliced leases that could result in a claim. Also list executory contracts on Schedule A/E, Property (Official Form 106A/B) and on the contracts on Schedule A/E, Property (Official Form 106A/B) and on the claim Secured by Property. If more space is needed, copy the Part you need, fill it usus, number the entries in the boxes on the list. Attacl needed to expend the property in the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the property of the list. Attacl needed to expend the list. Attacl	United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	3						
Check if this is an amended filing Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims te as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party reversionly contracts on unexpired leases that could result in a claim. Also list executory contracts on Schedule AB; Property (Official Form 106AB) and on the claim Secured by Property. If more space is needed, copy the Part you need, fill it usus, number the entries in the boxes on the list. Attacl the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and caumber (if known). Part 1: List All of Your PRIORITY Unsecured claims. 1. Do any creditors have priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim lister identify what type of claim is it. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, lift out the Continuation Page of Part 1. If more than one reditor hades a particular claim, list the other reditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority more more than the priority amount. IRS Last 4 digits of account number \$ 800.00 \$ 800.00 \$ \$0.00 \$	Case num	ber									
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party in yeaeutory contracts or unexpired leases that could result in a claim. Also list sexuetory contracts on Schedule A/B: Property (Official Form 1064) and on schedule of: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and catumetre (if known). PORT 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. **Se.** 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim lister identify what type of claim it is. If a claim has be creditor has more than one priority unsecured claim, list the creditor share and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor's hare. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the cher creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** **Priority Creditor's Name** **PO Box 7346** **Philadelphia, PA 19101** Number Sireet City State Zip Code** **Who incurred the debty? Check one.** Debtor 1 and Debtor 2 only											
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party in yeaeutory contracts or unexpired leases that could result in a claim. Also list sexuetory contracts on Schedule A/B: Property (Official Form 1064) and on schedule of: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and catumetre (if known). PORT 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. **Se.** 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim lister identify what type of claim it is. If a claim has be creditor has more than one priority unsecured claim, list the creditor share and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor's hare. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the cher creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** **Priority Creditor's Name** **PO Box 7346** **Philadelphia, PA 19101** Number Sireet City State Zip Code** **Who incurred the debty? Check one.** Debtor 1 and Debtor 2 only	Official	Form 106F/F									
Las a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party resecutory contracts or unexprired leases that could result in a claim. Also list executory contracts or an explaination of each type of claim. The contracts or according to the creditor space of the creditor separately for each claim. For each claim list the contract or according to the creditor space of			Who Have Unsec	ured	Claims						12/15
intervention of contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106AB) and on bribdule or Schedule Officials and Unexpired Leases (Official Form 106AB) and on the lided any creditors with parties and Unexpired Leases (Official Form 106AB) and on the lided any creditors with parties in the boxes on the left. Attack Continuation Page to this page, if you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and calcumber (if known). Part 1: List All of Your PRIORITY Unsecured Claims List All of Your PRIORITY Unsecured Claims against you?						r credito	rs with NONF	RIORITY	laims. List	the othe	
1. Do any creditors have priority unsecured claims against you? No. Go to Part 2.	Schedule G: D: Creditors he Continua number (if ki	Executory Contracts and Unexpir Who Have Claims Secured by Pro ation Page to this page. If you have nown).	red Leases (Official Form 106G). operty. If more space is needed, e no information to report in a P	. Do not in copy the I	clude any cred Part you need,	ditors wit , fill it out	h partially se , number the	cured clain entries in	ns that are the boxes	listed in on the lef	Schedule ft. Attach
List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed identify what type of claim is it. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditor's in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount Nonpriority amount. Nonpriority amount Secured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditor's name. From explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount. Nonpriority amounts. As much as possible, list that claims. Priority and nonpriority amounts. As much as possible, list the claims. Nonpriority amounts are the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the creditor's name. If you have more than two priority and nonpriority amounts. As much as possible, list that claim. For each claim is set which are not the Continuation Page of Part 1. If more than two priority and nonpriority amounts. As much as possible, list that claim is in the claim is set when the certifier of the certifier is name. If you have more than two priority and nonpriority amounts. As much as possible in the claim is the claim is set with the Continuation Page of Part 1. If more than two priority and nonpriority amounts. As much as possible in the claim is the claim is the claim is set of the creditor in the creditor in the instruction booklet. Total claim Priority and nonpriority amount in the instruction book	1. Do a	any creditors have priority unsecu	red claims against you?								
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. Iso claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) IRS Last 4 digits of account number		No. Go to Part 2.									
identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) It is not be a continuation of each type of claim, see the instructions for this form in the instruction booklet.) It is not lead to priority and nonpriority amount. As much as possible, but have priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditors in Part 3. It is not lead to priority unsecured claims. Priority amount Nonpriority amount. Nonpriority amount appears to part 1. If more than two priority and nonpriority amount appears to part 1. If more than two priority and nonpriority unsecured claims. Priority amount Nonpriority		Yes.									
IRS	iden poss	tify what type of claim it is. If a claim sible, list the claims in alphabetical o	has both priority and nonpriority a rder according to the creditor's nar	mounts, lis me. If you h	t that claim her have more than	e and sho	w both priority	and nonp	riority amou	nts. As m	nuch as
IRS	(For	an explanation of each type of claim	n, see the instructions for this form	in the instr	ruction booklet.		claim	-			•
IRS Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims	21							amount		amount	Ł
Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims		9	1 4 4 - 1 1	4		•	800 00	œ.	800 OO	Φ.	\$0.00
PO Box 7346 Philadelphia, PA 19101 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims			Last 4 digits of account	t number		_ \$	000.00	_ \$	000.00	. \$	Ψ0.00
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations No Taxes and certain other debts you were intoxicated Other. Specify Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims	PC	D Box 7346	When was the debt inco	urred?	2014			_			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of PRIORITY unsecured claim: community debt Is the claim subject to offset? Domestic support obligations No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims	Nu	mber Street City State Zlp Code	As of the date you file,	the claim i	is: Check all th	nat apply					
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims	_		☐ Contingent								
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims		•	_								
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims		Debtor 2 only	☐ Unliquidated								
Check if this claim is for a community debt Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Cother. Specify Taxes List All of Your NONPRIORITY Unsecured Claims	•	Debtor 1 and Debtor 2 only	☐ Disputed								
Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims		At least one of the debtors and ano	ther								
Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims			Type of PRIORITY unse	cured clai	im:						
☐ Yes ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ☐ Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims		•	☐ Domestic support obl	ligations							
Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims		No	■ Taxes and certain oth	ner debts y	ou owe the gov	ernment					
Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims		Yes	☐ Claims for death or p	ersonal inju	ury while you w	ere intoxi	cated				
Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims			Other. Specify								
			, ,	Taxes	S						
	Part 2:	List All of Your NONDRIODIT	Y Unsecured Claims								
3. DO ANY CIEDIDIS HAVE HONDHOURY UNSECURED CIAINIS ADAINST VOU?											
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.			<u> </u>								

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Yes.

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	Charles E Greene Marcella A Greene	Case number (if know)		
4.1	AT&T	Last 4 digits of account number	\$	162.00
ı	Priority Creditor's Name PO Box 6416 Carol Stream, IL 60197	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
_	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
ı	■ Debtor 1 and Debtor 2 only	☐ Disputed		
[☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Student loans		
	lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
I	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
[Yes	Other. Specify Services	_	
	Cap One	Last 4 digits of account number	\$	1,729.00
F	Priority Creditor's Name PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?		
1	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
[Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
[At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community lebt	☐ Student loans		
l.	s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
ı	No	\square Debts to pension or profit-sharing plans, and other similar debts		
[Yes	Other. Specify Credit Card		
4.3	Cap One	Last 4 digits of account number	\$	5,374.00
F	Priority Creditor's Name PO Box 30281	When was the debt incurred?		
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

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ebtor 1 Charles E Greene ebtor 2 Marcella A Greene	Case number (if know)	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Cap One	Last 4 digits of account number	\$ 2,271.00
Priority Creditor's Name PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Cap One	Last 4 digits of account number	\$ 3,944.00
Priority Creditor's Name PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
ls the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Cardio Medicine	Last 4 digits of account number	\$ 103.00
Priority Creditor's Name c/o CCB PO Box 63 Kankakee, IL 60901	When was the debt incurred?	

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tor 1 Charles E Greene tor 2 Marcella A Greene	Case number (if know)		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
☐ Debtor 1 only	Li Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
■ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt			
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Medical Services		
Comenity New York & Co	Last 4 digits of account number	\$	247.0
Priority Creditor's Name		Ψ	
PO Box 659728 San Antonio, TX 78265	When was the debt incurred?		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	- Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other Specify Credit Card		
— 165	Other. Specify		
Directv	Last 4 digits of account number	\$	305.0
Priority Creditor's Name PO Box 9001069 Louisville, KY 40290	When was the debt incurred?		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Services		
Endodontic & Periodontic			
Associates	Last 4 digits of account number	\$	304.0
Priority Creditor's Name	Last 4 digits of account number	Φ	

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Debto	Marcella A Greene	Case number (if know)		
	18130 South Halsted Homewood, IL 60430	When was the debt incurred?		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did		
	_	not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Medical Services		
4.40				
4.10	Home Depot Priority Creditor's Name	Last 4 digits of account number	\$	549.00
	PO Box 78011 Phoenix, AZ 85062	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	☐ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Card		
4.11	Macys	Last 4 digits of account number	\$	1,264.00
	Priority Creditor's Name PO Box 78008	When was the debt incurred?		
	Phoenix, AZ 85062 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify Credit Card		
1 10	On one One did One is			4.007.00
4.12	Sears Credit Cards	Last 4 digits of account number	Φ.	1,694.00

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	Charles E Greene Marcella A Greene	Case number (if know)		
	Priority Creditor's Name P.O. Box 78051	When was the debt incurred?		
-	Phoenix, AZ 85062 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. □ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Card	_	
4.13	St Margaret Mercy Health Center	Last 4 digits of account number	\$	100.00
	Priority Creditor's Name 37621 Eagle Way	When was the debt incurred?		
-	Chicago, IL 60678 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. □ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Medical Services		
4.14	SYNCB Care Credit	Last 4 digits of account number	\$	651.00
	Priority Creditor's Name PO Bo 965036	When was the debt incurred?	·	
-	Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. □ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit Card		

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Debtor	2 Marcella A Greene	Case number (if know)	
4.15	T Mobile Priority Creditor's Name	Last 4 digits of account number	\$ 245.00
	PO Box 742596 Cincinnati, OH 45274	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Services	
4.16	T Mobile	Last 4 digits of account number	\$ 618.00
	Priority Creditor's Name PO Box 742596	When was the debt incurred?	
	Cincinnati, OH 45274 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	☐ Debtor 1 only		
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Services	
4.17	Target	Last 4 digits of account number	\$ 889.00
	Priority Creditor's Name PO Box 660170	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Credit Card	

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Debtor 1 Charles E Greene Debtor 2 Marcella A Greene Case number (if know) 4.18 737.00 Target Last 4 digits of account number Priority Creditor's Name When was the debt incurred? PO Box 660170 Dallas, TX 75266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.19 4,851.00 Wells Fargo FNB Last 4 digits of account number Priority Creditor's Name PO Box 660553 When was the debt incurred? Dallas, TX 75266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only ■ Unliquidated □ Disputed ■ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other, Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name Address On which entry in Part 1 or Part2 did you list the original creditor? **AFNI** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 3427 Part 2: Creditors with Nonpriority Unsecured Claims **Bloomington, IL 61702** Last 4 digits of account number On which entry in Part 1 or Part2 did you list the original creditor? Name Address **Choice Recovery** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1550 Old Henderson Rd, Suite S100 ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43220 Last 4 digits of account number Name Address On which entry in Part 1 or Part2 did you list the original creditor?

Official Form 106 E/F

Convergent Outsourcing

8000 SW 39th Street

Line **4.16** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

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Debtor 2 Marcella A Greene		Case number (if know)
Renton, WA 98057-4975	Last 4 digits of account n	■ Part 2: Creditors with Nonpriority Unsecured Claims umber
Name Address	On which entry in Part 1 o	or Part2 did you list the original creditor?
Maury Cobb, Atty	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
301 Beacon Pkwy West Suite 100 Birmingham, AL 35209		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account n	umber
Name Address	On which entry in Part 1 o	or Part2 did you list the original creditor?
Miramed	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Dept 77304		■ Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 77000 Detroit, MI 48277		
Detroit, wii 40277	Last 4 digits of account n	umber

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total cla	aim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	800.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	800.00
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	26,037.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$	26,037.00

		DUGUITIO	111 1 1000 23 01 33	
Fill in this infor	mation to identify your	case:		
Debtor 1	Charles E Greene)		
	First Name	Middle Name	Last Name	
Debtor 2	Marcella A Green	е		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the c er, Street, City, State and ZIP Co	ontract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					<u> </u>
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldic	ZII Oodc	
2.3	Name				<u> </u>
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4	•				
	Name				_
					<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.5	<i>-</i> ,				
2.0	Name				_
	1401116				
	Ni	04===+			<u> </u>
	Number	Street			
	City		State	ZIP Code	_
	.,				

		Docume	ent Page 30 o	<u>f 55 </u>	
Fill in this i	nformation to identify your	case:			
Debtor 1	Charles E Greene				
	First Name	Middle Name	Last Name		
Debtor 2	Marcella A Green				
(Spouse if, filing) First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe					
(if known)				☐ Check if this is ar	n
				amended filing	
	Form 106H ule H: Your Code	ebtors		1;	2/15
people are f ill it out, an our name a	iling together, both are equal d number the entries in the and case number (if known)	ally responsible for sup boxes on the left. Attac . Answer every question	plying correct informat h the Additional Page t ı.	s complete and accurate as possible. If two marr ion. If more space is needed, copy the Additiona o this page. On the top of any Additional Pages,	al Page,
1. Do yo	ou have any codebtors? (If y	ou are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes					
□ 162					
	n the last 8 years, have you, California, Idaho, Louisiana,			y? (Community property states and territories includington, and Wisconsin.)	le
■ No. C	Go to line 3.				
☐ Yes.	Did your spouse, former spou	ise, or legal equivalent liv	e with you at the time?		
in line 2 Form 1	again as a codebtor only it	f that person is a guarar	ntor or cosigner. Make	if your spouse is filing with you. List the person sure you have listed the creditor on Schedule D 16G). Use Schedule D, Schedule E/F, or Schedule	(Officia
_	olumn 1: Your codebtor me, Number, Street, City, State and Zli	P Code		Column 2: The creditor to whom you owe the Check all schedules that apply:	debt
3.1				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
NI.					
Ci	umber Street ty	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			Schedule E/F, line	
				☐ Schedule G, line	
- NI	umber Street			_	
Ci		State	ZIP Code		

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Fill	in this information to	identify your ca	ase:									
Deb	otor 1	Charles E Gr	reene			_						
	otor 2 buse, if filing)	Marcella A G	reene			_						
Uni	ted States Bankrupt	cy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		_						
(If kn	se number	4001					□ A		ed fi ent	showi	ing postpetition following dat	
	fficial Form						N	IM / DD/ \	ΥΥΥ	Y		
S	chedule I: `	Your Inco	ome									12/15
sup spo atta	plying correct infoluse. If you are separate shee	rmation. If you arated and you	ible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and you th you, do not inc	r spouse lude infor	is li mati	ving with ion abou	you, inc t your sp	lud	e info se. If r	ormation abo	out your is needed,
1.	Fill in your emplo	pyment		Debtor 1				Debtor 2	2 or	non-	filing spous	e
	If you have more t		Franksim aut atatus	☐ Employed			☐ Employed					
	attach a separate page with information about additional employers.		Employment status Occupation	■ Not employed				■ Not e	mp	loyed		
	Include part-time, self-employed wor		Employer's name									
	Occupation may ir or homemaker, if i		Employer's address									
			How long employed th	nere?				_				
Par	t 2: Give Det	ails About Mon	thly Income									
	mate monthly inco		ate you file this form. If	you have nothing to	report for	any	line, write	e \$0 in th	e sp	ace. I	Include your i	non-filing
-	u or your non-filing s e space, attach a se		ore than one employer, co	ombine the informat	ion for all e	emp	loyers for	that pers	on (on the	lines below.	If you need
							For Del	otor 1			ebtor 2 or ling spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$		0.00	5	S	0.00	<u>)</u>
3.	Estimate and list	monthly overti	me pay.		3.	+\$		0.00	+	\$_	0.00)
4.	Calculate gross I	ncome. Add lin	e 2 + line 3.		4.	\$		0.00		\$	0.00	

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	tor 1 tor 2	Charles E Greene Marcella A Greene		Case ı	number (<i>if known</i>)				
				For	Debtor 1		Debtor 2 of		
	Cop	y line 4 here	4.	\$	0.00	\$		0.00	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		0.00	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		0.00	-
	5e.	Insurance	5e.	\$	0.00	\$		0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	
	5g.	Union dues	5g.	\$	0.00	\$		0.00	•
	5h.	Other deductions. Specify:	5h.+	\$	0.00 +	\$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$		0.00	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b.	\$ —	0.00	\$—		0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	0.00	\$ \$		0.00	-
	8d.	Unemployment compensation	8d.	\$_	0.00	\$		0.00	
	8e.	Social Security	8e.	\$	1,563.00	\$		1.00	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	nce 8f. 8g.	\$ \$_	0.00 992.00	\$		0.00	-
	8h.	Other monthly income. Specify:	8h.+	\$	0.00 +	· —		0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,555.00	\$		51.00))
40	0-1	sulate monthly income. Add the 7 a the 0	40 6		555.00		54.00	Ф.	0.000.00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,555.00 + \$_	7	51.00 =	5 _	3,306.00
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are notify:	our depen		•	,	Schedule J	_	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The se that amount on the Summary of Schedules and Statistical Summary of Celies					. 12. \$		3,306.00
13.	Do	you expect an increase or decrease within the year after you file this for	rm?					ombir onthl	ned y income
		No. Yes. Explain:							

	in this information	Care to March						
FIII	in this informa	ation to identify y	our case:					
Deb	tor 1	Charles E G	reene				eck if this is:	
Deb	tor 2	Marcella A G	reene				An amended filing A supplement show	wing postpetition chapter
(Spc	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bankı	ruptcy Court for the:	NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	nses				12/15
info	ormation. If m		eded, atta	. If two married people a ach another sheet to this n.				
Par	t 1: Desc	ribe Your House	hold					
1.	Is this a joi	nt case?						
	□ No. Go to		_					
			in a sepai	rate household?				
	■ N	-	st file Offic	ial Form 106J-2, Expense	s for Separate Hous	ehold of De	ebtor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D		Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		14	Yes
					Daughter		17	□ No ■ Yes
								☐ No
					-			☐ Yes
								□ No
3.	Do your exp	penses include		No				☐ Yes
	expenses of	f people other t	han 🦳	No Yes				
	yourself an	d your depende	nts?	100				
exp	imate your e	a date after the	our bankr	uptcy filing date unless y				apter 13 case to report of the form and fill in the
the		h assistance an		government assistance is cluded it on <i>Schedule I:</i>			Your exp	enses
,011	1 01111 10	,						
4.		or home owners and any rent for th		nses for your residence. I or lot.	Include first mortgag	je 4.	\$	1,297.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	·	5.00
		e maintenance, re eowner's associa		upkeep expenses		4c. 4d.	·	0.00
5.				our residence, such as ho	me equity loans	4u. 5.		0.00

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	tor 1 tor 2		E Greene A Greene	Case num	ber (if known)				
6.	Utilit	ies:							
-	6a.		, heat, natural gas	6a.	\$	180.00			
	6b.	Water, sev	wer, garbage collection	6b.	\$	90.00			
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	185.00			
	6d.	Other. Spe	ecify:	6d.	\$	0.00			
7.	Food	and hous	ekeeping supplies	7.	\$	300.00			
8.	Child	dcare and c	children's education costs	8.	\$	0.00			
9.	Cloth	ning, laund	Iry, and dry cleaning	9.	\$	65.00			
10.	Pers	onal care p	products and services	10.	\$	40.00			
11.	Medi	ical and de	ntal expenses	11.	\$	20.00			
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.	40		400.00			
			ar payments.	12.	·	160.00			
			clubs, recreation, newspapers, magazines, and books	13.	·	21.00			
	_		ributions and religious donations	14.	\$	0.00			
15.		rance.							
		ot include in Life insura	nsurance deducted from your pay or included in lines 4 or 20.	15a.	¢	0.00			
		Health ins		15a. 15b.	•	0.00			
		Vehicle in		15c.	·	180.00			
			urance. Specify:	15d.	·	0.00			
16			nclude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00			
	Spec	cify:	, , ,	16.	\$	0.00			
17.			ease payments:	47-	Φ.	550.00			
			ents for Vehicle 1	17a.	· : ———	553.00			
			ents for Vehicle 2	17b.	•	0.00			
		Other. Spe		17c.	·	0.00			
		Other. Spe	·	17d.	\$	0.00			
18.			of alimony, maintenance, and support that you did not repo		\$	0.00			
10			your pay on line 5, Schedule I, Your Income (Official Form 1	061).	\$	0.00			
19. Other payments you make to support others who do not live with you. Specify: 19.						0.00			
20	•	-	erty expenses not included in lines 4 or 5 of this form or on		our Income				
_0.			s on other property	20a.		0.00			
		Real estat		20b.	·	0.00			
			homeowner's, or renter's insurance	20c.	· · · · · · · · · · · · · · · · · · ·	0.00			
			nce, repair, and upkeep expenses	20d.	·	0.00			
			ner's association or condominium dues	20e.	•	0.00			
21		r: Specify:			+\$	0.00			
	010	TOPOUNY.				0.00			
22.		•	monthly expenses						
			through 21.		\$	3,096.00			
	22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106	6J-2	\$				
	22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	3,096.00			
23.	Calc	ulate your	monthly net income.						
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,306.00			
	23b.	Copy your	r monthly expenses from line 22c above.	23b.	-\$	3,096.00			
	23c.		our monthly expenses from your monthly income.	22-	¢	210.00			
		The result	t is your monthly net income.	23c.	\$	210.00			
24.	For ex modifi	Oo you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
	■ No								
	☐ Ye	es.	Explain here:						

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Debtor 1	Charles E Greene	Charles E Greene			
	First Name	Middle Name	Last Name		
Debtor 2	Marcella A Green	Marcella A Greene			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an	
				amended filing	
ou must file the	is form whenever you fi	le bankruptcy schedul n connection with a ba		a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20	
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an att	orney to help you fill out bankrupt	cy forms?	
■ No					
☐ Yes	s. Name of person			kruptcy Petition Preparer's Notice, Declaration, re (Official Form 119).	
	alty of perjury, I declare e true and correct.	that I have read the su	mmary and schedules filed with th	nis declaration and	
X /s/ Cha	arles E Greene		X /s/ Marcella A Gre	ene	
	arles E Greene es E Greene		X /s/ Marcella A Greene Marcella A Greene		

Date December 4, 2015

Date December 4, 2015

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=:11	in this infe	armation to identify you									
		ormation to identify your Charles E Green									
Debtor 1		First Name	Middle Name	Last Name							
	otor 2	Marcella A Green	пе								
(Spo	use if, filing)	First Name	Middle Name	Last Name							
Unit	ted States I	Bankruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS							
Cas (if kn	se number own)					theck if this is an					
Of	ficial F	orm 107				mondou ming					
Sta	atemer	nt of Financial A	Affairs for Individ	luals Filing for B	ankruptcy	12/15					
info	rmation. If		attach a separate sheet to		equally responsible for sup y additional pages, write yo						
			rital Status and Where You	ı Lived Before							
1.		What is your current marital status?									
	■ Marrio	ed narried									
2.	During the last 3 years, have you lived anywhere other than where you live now?										
	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.										
	Debtor 1	Prior Address:	Dates Debtor 1 lived there			Dates Debtor 2 lived there					
					nity property state or territorico, Texas, Washington and V						
	■ No □ Yes.	Make sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).							
Par		lain the Sources of You	·	,							
4.	Fill in the t	otal amount of income yo	u received from all jobs and	ng a business during this you all businesses, including part e together, list it only once u		ndar years?					
	□ No ■ Yes.	Fill in the details.									
		Dobton 2									
			Debtor 1	Grace income	Debtor 2	Gross income					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	(before deductions and exclusions)					
			☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$0.00					
			☐ Operating a business		☐ Operating a business						

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Debtor 1 Charles E Greene

Debtor 2	Marcella A (reene		Cas	e number (<i>if known</i>)					
Include unempl	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.									
List ead	List each source and the gross income from each source separately. Do not include income that you listed in line 4.									
	n									
	es. Fill in the d	etails.								
		Dahta	- 4		Dahtan 2					
			es of income be below	Gross income (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)			
			YTD: Joint Dbt Pension fits	\$36,000.00						
			Joint Dbt SS & ion Benefits	\$35,000.00						
			Joint Dbt SS & ion Benefits	\$35,000.00						
_	□ No. □ Yes	Go to line 7. List below each cre paid that creditor. D	editor to whom you paid Do not include payments to an attorney for the		in one or more pay gations, such as ch	ments and thild support a	he total amount you			
■ Ye		•	• •			i aujustinent				
		or Debtor 2 or both I	have primarily consu		al of \$600 or more?	·	•			
	During the No.	or Debtor 2 or both I	have primarily consu	mer debts.	al of \$600 or more?	·	•			
	During the	or Debtor 2 or both I 90 days before you f Go to line 7. List below each cre	have primarily consuriled for bankruptcy, did editor to whom you paid or domestic support of	mer debts.	d the total amount	you paid that	t. t creditor. Do not			
Credit	During the No.	Go to line 7. List below each cre include payments for an attorney for this	have primarily consuriled for bankruptcy, did editor to whom you paid or domestic support of	mer debts. If you pay any creditor a total dia total of \$600 or more an oligations, such as child sup	d the total amount port and alimony.	you paid that Also, do not i	t. t creditor. Do not			
7. Within Insiders corpora includin support	During the No. No. Yes Tor's Name and Year before is include your attions of which no one for a but and alimony.	Go to line 7. List below each creinclude payments for an attorney for this d Address you filed for bankrurelatives; any general you are an officer, dissiness you operate as	have primarily consuriled for bankruptcy, did or domestic support obtankruptcy case. Dates of paymer uptcy, did you make a partners; relatives of a rector, person in control	mer debts. If you pay any creditor a total If a total of \$600 or more an oligations, such as child sup	Amount you still owe wed anyone who erships of which you of their voting seci	you paid that Also, do not i Was this p was an insi u are a gene urities; and a	t creditor. Do not include payments to eayment for der? ral partner; ral partner; rany managing agent,			
7. Within Insiders corpora includin support	During the No. No. Yes Tor's Name and Year before is include your attions of which no one for a but and alimony.	or Debtor 2 or both It 90 days before you for Go to line 7. List below each creinclude payments for an attorney for this d Address you filed for bankrurelatives; any general you are an officer, dissiness you operate as	have primarily consuriled for bankruptcy, did or domestic support obtankruptcy case. Dates of paymer uptcy, did you make a partners; relatives of a rector, person in control	mer debts. If you pay any creditor a total of \$600 or more an oligations, such as child superties. Total amount paid a payment on a debt you of any general partners; partners, or owner of 20% or more U.S.C. § 101. Include payment.	Amount you still owe wed anyone who erships of which you of their voting seci	you paid that Also, do not i Was this p was an insion u are a gene urities; and a support obliga	t creditor. Do not include payments to eayment for der? ral partner; ral partner; rany managing agent,			

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De	btor 2 Marcella A Greene		Cas	se number (if known)			
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or continuous payments.		ments or transfer a	any property on ac	count of a de	ebt that benefited a	
	■ No □ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment tor's name	
Pa	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.						
	■ No						
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of the	e case	
	Case number		countries agency				
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.						
	■ No□ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Date		Value of the propert	
		Explain what happened	d			propert	
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No						
	Yes. Fill in the details. Creditor Name and Address	Describe the action the	e creditor took	Date a	ction was	Amoun	
	Orealtor Name and Address	besonde the dotton the	orcanor took	taken	olion was	Amoun	
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?						
	■ No □ Yes						
Pa	rt 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup No	otcy, did you give any gift	s with a total value	of more than \$60	ງ per person'	?	
	☐ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the git	you gave fts	Value	
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankrup ■ No	otcy, did you give any gift	s or contributions	with a total value	of more than	\$600 to any charity	
	Yes. Fill in the details for each gift or co						
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you	u contributed	Dates contri		Valu	
Pa	rt 6: List Certain Losses						

8

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other

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	otor 1 Charles E Greene Marcella A Greene			Case number	(if known)	
	disaster, or gambling?					
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lot the amount that insurance has paid. Lot g insurance claims on line 33 of Scheoty.	_ist	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfe	rs				
	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	r preparir	ng a bankruptcy petition?			rty to anyone you
	□ No■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Edwin L Feld & Associates, LLC 1 N LaSalle Street Suite 1225 Chicago, IL 60602 Chicago, IL 60602		Attorney Fees		11/28/15 - Total Fees \$4000.00	\$300.00
	Within 1 year before you filed for bankr promised to help you deal with your crop Do not include any payment or transfer the	editors o	r to make payments to your creditor		or transfer any prope	rty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a substitution No Yes. Fill in the details.	our businers made a	ess or financial affairs? as security (such as the granting of a s			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					
	Within 10 years before you filed for ban beneficiary? (These are often called asset ■ No ■ Yes. Fill in the details.			elf-settled tru	ust or similar device	of which you are a
	Name of trust		Description and value of the prope	erty transferr	ed	Date Transfer was made

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Debtor 1 Charles E Greene
Debtor 2 Marcella A Greene

Case number (if known)

Par	t 8: List of Certain Financial Accounts, In	struments, Safe Depos	sit Boxes, and St	orage Unit	s			
20.	 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage 							
	houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number			Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed f	or bankruptcy, ar	ny safe dep	posit box or other deposi	tory for securities,		
	■ No							
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had an Address (Number, State and ZIP Code)		Describe 1	the contents	Do you still have it?		
22.	Have you stored property in a storage unit	or place other than yo	ur home within 1	year befor	e you filed for bankrupto	ey .		
	No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		Do you still have it?					
Par	t 9: Identify Property You Hold or Control	I for Someone Else						
23.	Do you hold or control any property that so for someone.	omeone else owns? Inc	clude any propert	ty you bori	owed from, are storing f	or, or hold in trust		
	■ No							
	Yes. Fill in the details.							
	Owner's Name	Where is the pro	operty?	Describe	the property	Value		
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City Code)				,		
Par	t 10: Give Details About Environmental Inf	formation						
For	the purpose of Part 10, the following definit	ions apply:						
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	the air, land, soil, surfa	ice water, ground	• .				
	Site means any location, facility, or propert to own, operate, or utilize it, including disp		y environmental I	law, wheth	er you now own, operate	e, or utilize it or used		
	Hazardous material means anything an envhazardous material, pollutant, contaminant		s as a hazardous	waste, ha	zardous substance, toxid	c substance,		
Rep	ort all notices, releases, and proceedings th	nat you know about, re	gardless of when	they occu	ırred.			
24.	Has any governmental unit notified you that	t you may be liable or	potentially liable	under or i	n violation of an environ	mental law?		
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental u Address (Number, ZIP Code)	nit Street, City, State and		onmental law, if you it	Date of notice		

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Debtor 1 Debtor 2 Charles E Greene Marcella A Greene Case number (if known)

Del	otor 2 Marcella A Greene	_	Case number (if known)						
25.	Have you notified any governmental unit of	of any release of hazardous material?							
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or ac	dministrative proceeding under any envi	ironmental law? Include settleme	nts and orders.					
	■ No								
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pai	t 11: Give Details About Your Business o	r Connections to Any Business							
27.	Within 4 years before you filed for bankru	-	ov of the following connections to	any husiness?					
21.		l in a trade, profession, or other activity,		ally busiless:					
		npany (LLC) or limited liability partnersh	•						
	☐ A partner in a partnership	npany (220) or miniou habiniy partitoron	p (==: /						
	<u> </u>	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	_								
ı	 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. 								
	Business Name	Describe the nature of the business	Employer Identification num	nber					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN. Dates business existed					
28.	Within 2 years before you filed for bankru institutions, creditors, or other parties.	ptcy, did you give a financial statement	to anyone about your business?	Include all financial					
	■ No								
	☐ Yes. Fill in the details below.								
	Name Address	Date Issued							
	(Number, Street, City, State and ZIP Code)								
Pai	t 12: Sign Below								
are with	ve read the answers on this Statement of F true and correct. I understand that making a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property,	or obtaining money or property b						
/s/	Charles E Greene	/s/ Marcella A Greene							
_	arles E Greene nature of Debtor 1	Marcella A Greene Signature of Debtor 2							
·	e December 4, 2015	Date December 4, 2015	i						
	you attach additional pages to Your Stater			rm 107)?					
	<u></u>	Attach the Bankruptcy Petition Prepai		ture (Official Form 119)					
Offic	ial Form 107 State	ement of Financial Affairs for Individuals Filing	for Bankruptcy	page					

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Debtor 1 Charles E Greene
Debtor 2 Marcella A Greene Case number (if known)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 4, 2015

Signature Signature Charles E Greene
Debtor

Date December 4, 2015

Signature Is/ Marcella A Greene
Marcella A Greene
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Monies paid for prepetition services needed to limit the financial burden of the firm.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$300.00

toward the flat fee, leaving a balance due of \$3,700.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: December 4, 2015	
Signed:	
/s/ Charles E Greene	/s/ Edwin L Feld
Charles E Greene	Edwin L Feld 6188070
	Attorney for the Debtor(s)
/s/ Marcella A Greene	
Marcella A Greene	
Debtor(s)	
Do not sign this agreement if the amoun	ts are blank.
	Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In 1	Charles E Greene Marcella A Greene		Case No.				
		Debtor(s)	Chapter	13			
	DISCLOSURE OF COMPENS	ATION OF ATTO	RNEY FOR DE	EBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	4,000.00			
	Prior to the filing of this statement I have received		\$	300.00			
	Balance Due		\$	3,700.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compens	ation with any other person	unless they are mem	bers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names						
5.	In return for the above-disclosed fee, I have agreed to rende	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemetc. Representation of the debtor at the meeting of creditors atd. [Other provisions as needed]	ent of affairs and plan whic	h may be required;				
6.	By agreement with the debtor(s), the above-disclosed fee do	es not include the followin	g service:				
	(CERTIFICATION					
this	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.	reement or arrangement fo	r payment to me for re	epresentation of the debtor(s) in			
	December 4, 2015	/s/ Edwin L Feld					
	Date	Edwin L Feld 61					
		Signature of Attorn Edwin L Feld & A					
		1 N LaSalle Stre Suite 1225	et				
		Chicago, IL 6060)2				
		312-263-2100 F	ax: 312-263-9838				
		Name of law firm					

AFNI P.O. Box 3427 Bloomington, IL 61702

AT&T PO Box 6416 Carol Stream, IL 60197

Cap One PO Box 30281 Salt Lake City, UT 84130

Cardio Medicine c/o CCB PO Box 63 Kankakee, IL 60901

Choice Recovery 1550 Old Henderson Rd, Suite S100 Columbus, OH 43220

Comenity New York & Co PO Box 659728 San Antonio, TX 78265

Convergent Outsourcing 8000 SW 39th Street Renton, WA 98057-4975

Directv PO Box 9001069 Louisville, KY 40290

Endodontic & Periodontic Associates 18130 South Halsted Homewood, IL 60430

GM Financial PO Box 78143 Phoenix, AZ 85062

Home Depot PO Box 78011 Phoenix, AZ 85062 IRS PO Box 7346 Philadelphia, PA 19101

Macys PO Box 78008 Phoenix, AZ 85062

Maury Cobb, Atty 301 Beacon Pkwy West Suite 100 Birmingham, AL 35209

Miramed Dept 77304 PO Box 77000 Detroit, MI 48277

Sears Credit Cards P.O. Box 78051 Phoenix, AZ 85062

SPS PO Box 65250 Salt Lake City, UT 84165

St Margaret Mercy Health Center 37621 Eagle Way Chicago, IL 60678

SYNCB Care Credit PO Bo 965036 Orlando, FL 32896

Synchrony Bank PO Box 960061 Orlando, FL 32896

T Mobile PO Box 742596 Cincinnati, OH 45274

Target PO Box 660170 Dallas, TX 75266 Wells Fargo FNB PO Box 660553 Dallas, TX 75266